

UNITED STATES NATIONAL STAGE WORKSHEET

Charitta Burt

U. S. Application No. 10/561515

Publication Date 12/27/05 U.S. ONLY yes no

Publication No. WO 2005 007231 PCT/RO/101

Copy of ISR US Copy of IPER \_\_\_\_\_

Assignee information: \_\_\_\_\_

Priority Info: Country \_\_\_\_\_ No. 41913 /A date \_\_\_\_\_ MORE

Correspondence checked: 41913

Inventor Residence city: Ventura state and/or country CA citizenship: US

International Application No. PCT US 2003 019414 Language \_\_\_\_\_

Copy in International Application:  Translation: yes no Spec. pg no. \_\_\_\_\_ claims pgs \_\_\_\_\_

371 Filing Fees: \_\_\_\_\_ ; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 35 Chargeable 35 Independent 4

Number of drawing Sheets: 10 Foreign Text in drawing: \_\_\_\_\_

Oath/Declaration:  signed \_\_\_\_\_ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed 12/20/05 P. Attorney \_\_\_\_\_

Small entity fee: \_\_\_\_\_ SME document yes no

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

Article 19 Amendment: \_\_\_\_\_ ; replaced by Article 34 Amdt. \_\_\_\_\_

Copy ISA References \_\_\_\_\_

Copy of IPER: \_\_\_\_\_ Annexes \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_ No translation \_\_\_\_\_ Text sequence \_\_\_\_\_

Preliminary Amendment \_\_\_\_\_ date \_\_\_\_\_ 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS:  DATE: 12/20/05 2<sup>nd</sup> DATE \_\_\_\_\_

Request for Immediate Examination:

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: \_\_\_\_\_ Abstract pgs: 1

Priority Document \_\_\_\_\_ Number of copies included \_\_\_\_\_

Date of 35 USC Receipt of Request: 12/20/05, Notes: \_\_\_\_\_

Date Completion USC 371 Requirements: 12/20/05, /

Notice of Missing Requirements: \_\_\_\_\_ /

Notice of Defective Response: \_\_\_\_\_ /

Notice of Acceptance: 3/18/06, /

Notice to Comply with Nucleotide and/or Amino Acid Sequence disclosures: \_\_\_\_\_

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_

Other forms: \_\_\_\_\_

Extension of time: Number of months \_\_\_\_\_